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Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Ernestine First Name	First Name
	your driver's license or passport).	Middle Name	Middle Name
	Bring your picture identification to your meeting	Hart Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>7</u> <u>8</u> <u>5</u> <u>2</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

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Debtor 1 Ernestine		Ernestine Hart		Case number (if known)			
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	and En	nsiness names	✓ I have not used any business names or EIN	s. I have not used any business names or EINs.			
	(EIN) y	cation Numbers ou have used in t 8 years	Business name	Business name			
		trade names and	Business name	Business name			
	doing b	usiness as names	Business name	Business name			
			EIN	EIN			
				EIN			
5. V	Where	you live		If Debtor 2 lives at a different address:			
			439 E. 111th Pl., Unit 1E Number Street	Number Street			
			Chicago IL 60628				
			City State ZIP Code	City State ZIP Code			
			Cook County	County			
			If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
			Number Street	Number Street			
			P.O. Box	P.O. Box			
			City State ZIP Code	City State ZIP Code			
6.		ou are choosing	Check one:	Check one:			
	this dis bankru	strict to file for optcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Р	art 2:	Tell the Court A	bout Your Bankruptcy Case				
7.	Bankru	apter of the	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top o	otice Required by 11 U.S.C. § 342(b) for Individuals Filing f page 1 and check the appropriate box.			
	are cho under	oosing to file	Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				

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Deb	otor 1 Ernestine Hart		Case number (if known)						
8.	How you will pay the fee	I will pay the entire fee when I file court for more details about how you pay with cash, cashier's check, or mbehalf, your attorney may pay with a	nmay pay. Typically, if you are pay oney order. If your attorney is sub	ying the fee yourself, you may mitting your payment on your					
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).						
		I request that my fee be waived (Y By law, a judge may, but is not requi than 150% of the official poverty line fee in installments). If you choose the Filing Fee Waived (Official Form 103)	red to, waive your fee, and may do that applies to your family size an his option, you must fill out the App	o so only if your income is less and you are unable to pay the					
9.	Have you filed for	□ No							
	bankruptcy within the last 8 years?	∀ Yes.							
	·	District N.D. III.; Ch. 13; Case Dismi	Ssed When 01/28/2015 MM/DD/YYYY	Case number <u>15-02613</u>					
		District	When	Case number					
		District		Case number					
40	A	— N.	MM / DD / YYYY						
10.	Are any bankruptcy cases pending or being	☑ No							
	filed by a spouse who is not filing this case with	Yes.							
	you, or by a business		Relationsh						
	partner, or by an affiliate?	District	When						
		Debtor	Relationsh	nin to you					
		District							
		District	MM / DD / YYYY						
11.	Do you rent your residence?	✓ No. Go to line 12.☐ Yes. Has your landlord obtained ar residence?	n eviction judgment against you an	d do you want to stay in your					
		☐ No. Go to line 12. ☐ Yes. Fill out Initial State and file it with this bankru	ment About an Eviction Judgment uptcy petition.	Against You (Form 101A)					

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Deb	tor 1	Ernestine Hart				Case number (if known)		
P	art 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
busines	roprietorship is a s you operate as an al, and is not a			Name of business, if any					
	separate	e legal entity such as ration, partnership, or			Number Street				
	sole pro	ave more than one prietorship, use a			City		State	ZIP Co	de
	•	eparate sheet and attach it o this petition.			Health Care Busin Single Asset Rea	box to describe your business: ness (as defined in 11 U.S.C. § Il Estate (as defined in 11 U.S.C. defined in 11 U.S.C. § 101(53A) er (as defined in 11 U.S.C. § 10 e	101(27A)) C. § 101(51B)))	
Chapte Bankru		filing under 11 of the ptcy Code and a <i>small business</i>	can mos	set ap	propriate deadlines. If you	the court must know whether you indicate that you are a small nent of operations, cash-flow state texist, follow the procedure in	ll business de atement, and	ebtor, you federal ind	must attach your come tax return
	debtor?	debtor?		No.	I am not filing under C	hapter 11.			
		a definition of small ness debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am NOT a small bu	siness debto	r accordin	g to the definition in
	11 U.S.	S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a small busines	s debtor acco	ording to th	he definition in the
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property or Any Property	/ That Nee	ds Imm	ediate Attention
14.	propert alleged immine	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?		No Yes.	What is the hazard?				
	safety? any pro				If immediate attention	is needed, why is it needed?			
	perisha livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number Street			
						City		State	ZIP Code

Deb	etor 1 Ernestine	Hart	Case number (if known)				
Р	art 5: Explain	Your Efforts to Re	ceive a Briefing About Credi	it Coun	seling		
15.	Tell the court whether you have received briefing about credit counseling.	counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a	You m ☐ I re co file	nust check one eceived a brie unseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a	
	The law requires		the certificate and the payment ou developed with the agency.			the certificate and the payment you developed with the agency.	
	that you receive a briefing about credit counseling before you file for bankruptcy. You	counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion.	co file	unseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have ompletion.	
	must truthfully check one of the following choices.	-	ter you file this bankruptcy petition, copy of the certificate and payment	Within 14 days after you file this bankruptcy pet you MUST file a copy of the certificate and payr plan, if any.			
	If you cannot do so, you are not eligible to file. If you file anyway, the court can	services from ar unable to obtain days after I mad	ked for credit counseling n approved agency, but was those services during the 7 e my request, and exigent nerit a 30-day temporary quirement.	se un da cir	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.		
	dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	To ask for a 30-d requirement, atta efforts you made were unable to ob	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you otain it before you filed for what exigent circumstances	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		ch a separate sheet explaining wha to obtain the briefing, why you otain it before you filed for what exigent circumstances	
		dissatisfied with y	e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.	dis	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving briefing before you filed for bankruptcy.		
		still receive a brie You must file a co along with a copy developed, if any	If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
		•	the 30-day deadline is granted only imited to a maximum of 15 days.		Any extension of the 30-day deadline is granted onl for cause and is limited to a maximum of 15 days.		
		☐ I am not require credit counselin	d to receive a briefing about g because of:		-	d to receive a briefing about g because of:	
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.	
		briefing about cre	are not required to receive a did to counseling, you must file a of credit counseling with the court.	bri	efing about cre	u are not required to receive a edit counseling, you must file a of credit counseling with the court.	

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Debtor 1		Ernestine Hart		Case number (if known)				
P	art 6:	Answer These C	uesti	ons for Reporting Pเ	ırpos	ses		
16.	What kind have?	What kind of debts do you have?			-	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.						
			16c.	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.
17.	Are you	u filing under r 7?	$\overline{\mathbf{V}}$	No. I am not filing under	· Chap	oter 7. Go to line 18.		
	any exc exclude admini- are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?		•		•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Ernestine Hart		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I dand correct.	declare under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		· ·	id not pay or agree to pay someone who is not an attorney to help me ed and read the notice required by 11 U.S.C. § 342(b).			
		I request relief in accordance with th	e chapter of title 11, United States Code, specified in this petition.			
		-	ent, concealing property, or obtaining money or property by fraud in can result in fines up to \$250,000, or imprisonment for up to 20 years, i19, and 3571.			
		X /s/ Ernestine Hart	X Signature of Debter 2			
		Executed on 04/28/2017 MM / DD / YYYYY	Signature of Debtor 2 Executed on			

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Debtor 1	Ernestine Hart		Case number (if know	n)
represent	not represented by ey, you do not need	I, the attorney for the debtor(s) named in this pe eligibility to proceed under Chapter 7, 11, 12, or relief available under each chapter for which the the debtor(s) the notice required by 11 U.S.C. § certify that I have no knowledge after an inquiry is incorrect.	13 of title 11, United State person is eligible. I also 342(b) and, in a case in	tes Code, and have explained the concertify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Robert J. Adams & Associates Signature of Attorney for Debtor	Date	04/28/2017 MM / DD / YYYY
		Robert J. Adams & Associates Printed name		
		Robert J Adams & Associates		
		Firm Name		
		901 W Jackson Suite 202 Number Street		
		Number Street		
		Chicago	<u> L</u>	60607
		City	State	ZIP Code
		Contact phone (312) 346-0100	Email address	
		0013056		
		Par number	State	_

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Fill in this inf	formation to ide	entify your cas	se and this filing:		
Debtor 1	Ernestine		Hart		
Dentoi i	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		ha NORTHERN	DISTRICT OF ILLINOIS		
	Tikrupicy Court for a	ne. Non men	DISTRICT OF ILLINOIS		
Case number (if known)				—	if this is an led filing
					
Official Form					
Schedule A	/B: Property				12/15
sheet to this form	n. On the top of any	y additional pages	lying correct information. If more s, write your name and case numb	ber (if known). Answer eve	ery question.
1. Do you own	or have any legal (or equitable intere	est in any residence, building, land	d. or similar property?	
✓ No. Go	to Part 2. here is the property?	•	<u> </u>	, or c	
			ıll of your entries from Part 1, inclu	uding any	
	•	-	Vrite that number here		\$0.00
Part 2: De	scribe Your Vel	hicles			
•	•	-	t in any vehicles, whether they are e, also report it on Schedule G: Exec	_	-
3. Cars, vans, t	rucks, tractors, spe	ort utility vehicles	, motorcycles		
□ No ☑ Yes					
3.1.			s an interest in the property?	Do not deduct secured clair	•
Make:	Kia Sedona	Check of Debi	one. otor 1 only	amount of any secured clai Creditors Who Have Claims	
Model: Year:	2003	Debi	otor 2 only	Current value of the	Current value of the
Approximate milea			otor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		— П жие	east one of the debtors and another	\$1,275.00	\$1,275.00
2003 Kia Sedon miles)	a (approx. 140,00	ш.	eck if this is community property e instructions)		
			er recreational vehicles, other veh raft, fishing vessels, snowmobiles, m		
✓ No ☐ Yes					
	-	-	III of your entries from Part 2, inclu	uding any	\$1,275.00

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Deb	tor 1	Ernestine Hart Case	e number (if known)	
Pa	art 3:	Describe Your Personal and Household Items		
Doy	you own	or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware		
	□ No ☑ Yes	s. Describe 5 rooms of furniture of various ages		\$400.00
7.	Electro Example	nics les: Televisions and radios; audio, video, stereo, and digital equipment; compute music collections; electronic devices including cell phones, cameras, media		
	☐ No ✓ Yes	s. Describe 3 Tv's, Cell phone and other assorted items of electron	nics	\$250.00
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or stamp, coin, or baseball card collections; other collections, memorabilia, collections	•	
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool ta canoes and kayaks; carpentry tools; musical instruments	ıbles, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.	Firearn Example No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment		
	Yes	s. Describe		
11.	Example No	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	_	s. Describe Necessary wearing apparel		\$100.00
12.	Jewelry Example	y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloc gold, silver	om jewelry, watches, gems,	
	✓ No ☐ Yes	s. Describe		
13.		rm animals les: Dogs, cats, birds, horses		
	✓ No	s. Describe		
14.	Any oth	ner personal and household items you did not already list, including any hea list	alth aids you	
		s. Give specific		
15.		e dollar value of all of your entries from Part 3, including any entries for page	es you have	\$750.00

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Deb	tor 1	Ernestine Hart			Case number	r (if known)	
P	art 4:	Describe You	ur Financial As	sets			
				est in any of the following	?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Exampl	es: Money you hav petition	e in your wallet, in	your home, in a safe depos	it box, and on hand whe	n you file your	·
	☐ No ✓ Yes	j			Cash	ı:	\$50.00
17.	-		ses, and other simil	cial accounts; certificates of lar institutions. If you have			
	✓ No ☐ Yes	i	Instituti	ion name:			
18.			publicly traded stovestment accounts	ocks with brokerage firms, mone	y market accounts		
	✓ No ☐ Yes	i	Institution or issu	er name:			
19.	-	-	k and interests in i rtnership, and join	incorporated and unincor t venture	porated businesses, in	cluding	
	info	s. Give specific rmation about	Name of entity:			% of ownership:	
20.	Negotia	ble instruments inc	clude personal chec	er negotiable and non-negocks, cashiers' checks, prominent transfer to someone by	ssory notes, and money		
	info	s. Give specific rmation about m	Issuer name:				
21.		nent or pension ac es: Interests in IRA profit-sharing p	A, ERISA, Keogh, 4	01(k), 403(b), thrift savings	accounts, or other pens	ion or	
		s. List each	Type of account:	Institution name:			
22.	Your sh Exampl		eposits you have m	nade so that you may contin id rent, public utilities (elect			
	✓ No	5		Institution name or individ	ual:		
23.	Annuiti No	es (A contract for	a specific periodic	payment of money to you, e	either for life or for a num	ber of years)	
	Yes		Issuer name and				
24.	26 U.S.		IRA, in an accoung 9A(b), and 529(b)(1	nt in a qualified ABLE prog	ıram, or under a qualifi	ed state tuition pro	ogram.
	✓ No	S	Institution name a	and description. Separately	file the records of any i	nterests. 11 U.S.C.	§ 521(c)

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Deb	tor 1	Ernestine Hart	Case number (if known)	
25.	powers	equitable or future interests in property (other than anything listed ir exercisable for your benefit	n line 1), and rights or	
		. Give specific rmation about them		
26.	Exampl	, copyrights, trademarks, trade secrets, and other intellectual proper es: Internet domain names, websites, proceeds from royalties and licensi		
		. Give specific rmation about them		
27.	Exampl	s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings	s, liquor licenses, professional licen	ses
		. Give specific		
	info	rmation about them		
Mor	ey or pr	operty owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	ınds owed to you		
	☑ No			
	_	. Give specific information	Federal	:
		ut them, including whether already filed the returns	State:	
	and	the tax years	Local:	
29	Family	support		
_0.	-	es: Past due or lump sum alimony, spousal support, child support, mainte	enance, divorce settlement, property	y settlement
	✓ No	Cive appoints information	Alimony	
	Yes	. Give specific information	Alimony: Maintenance:	
			Support:	
			Divorce settlement	
			Property settlemen	: <u> </u>
30.		mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sick compensation, Social Security benefits; unpaid loans you made to so		
	✓ No ☐ Yes	. Give specific information		
31.		s in insurance policies es: Health, disability, or life insurance; health savings account (HSA); cre	dit, homeowner's, or renter's insura	nce
	con	. Name the insurance pany of each policy list its value Company name:	Beneficiary: Su	rrender or refund value:
32.	If you ar	erest in property that is due you from someone who has died e the beneficiary of a living trust, expect proceeds from a life insurance p to receive property because someone has died	olicy, or are currently	
	☑ No			
	☐ Yes	. Give specific information		

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Deb	tor 1	Ernestine Hart Case nur	mber (if known)	
33.	Example	against third parties, whether or not you have filed a lawsuit or made a demand es: Accidents, employment disputes, insurance claims, or rights to sue	for payment	
	✓ No ☐ Yes.	Describe each claim		
34.		ontingent and unliquidated claims of every nature, including counterclaims of the set off claims	ne debtor and	
	✓ No ☐ Yes.	Describe each claim		
35.	Any fina	ncial assets you did not already list		
	✓ No ☐ Yes.	Give specific information		
36.	Add the attached	dollar value of all of your entries from Part 4, including any entries for pages your for Part 4. Write that number here	ou have →	\$50.00
Pa	art 5: [Describe Any Business-Related Property You Own or Have an Int	erest In. List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related property?		
		Go to Part 6. Go to line 38.		
				Current value of the portion you own?
20	A			Do not deduct secured claims or exemptions.
38.		ts receivable or commissions you already earned		
	✓ No ☐ Yes.	Describe		
39.		quipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, desks, chairs, electronic devices	rugs, telephones,	
	✓ No ☐ Yes.	Describe		
40.	Machine	ery, fixtures, equipment, supplies you use in business, and tools of your trade		
	✓ No ☐ Yes.	Describe		
41.	Inventor	у		
	✓ No ☐ Yes.	Describe		
42.	Interest	s in partnerships or joint ventures		
	✓ No ☐ Yes.	Describe Name of entity:	% of ownership:	
43.	Custom	er lists, mailing lists, or other compilations		
	☑ No ☐ Yes.	Do your lists include personally identifiable information (as defined in 11 U.S.0 ☐ No ☐ Yes. Describe	C. § 101(41A))?	

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Debt	or 1	Ernestine Hart	Case number (if known)	
44.	Any bu	usiness-related property you did not	already list	
	✓ No ☐ Yes	s. Give specific information.		
45.	Add th	e dollar value of all of your entries fr	rom Part 5, including any entries for pages you have	\$0.00_
	art 6:		ا nmercial Fishing-Related Property You Own or Have a	n Interest In.
46.	Do you	ı own or have any legal or equitable	interest in any farm- or commercial fishing-related property?	
	٠	. Go to Part 7. s. Go to line 47.		
47				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Farm a Examp No No Yes	les: Livestock, poultry, farm-raised fish	h	
48.	_	either growing or harvested		
		s. Give specific ormation		
49.	Farm a	and fishing equipment, implements, r	machinery, fixtures, and tools of trade	
	✓ No ☐ Yes			
50.	Farm a	and fishing supplies, chemicals, and	feed	
	✓ No ☐ Yes			
51.	Any fa	rm- and commercial fishing-related p	property you did not already list	
	_	s. Give specific ormation		
			rom Part 6, including any entries for pages you have	\$0.00
Pa	ert 7:	Describe All Property You Ov	wn or Have an Interest in That You Did Not List Above	
	-	u have other property of any kind you les: Season tickets, country club mem	· · · · · · · · · · · · · · · · · · ·	
	✓ No ☐ Yes	s. Give specific information.		
54.	Add th	e dollar value of all of your entries fr	rom Part 7. Write that number here	\$0.00

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Debtor 1	Ernestine Hart	Case no	umber (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Part 1	: Total real estate, line 2		> _	\$0.00
56. Part 2	: Total vehicles, line 5	\$1,275.00		
57. Part 3	: Total personal and household items, line 15	\$750.00		
58. Part 4	: Total financial assets, line 36	\$50.00		
59. Part 5	: Total business-related property, line 45	\$0.00		
60. Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7	: Total other property not listed, line 54	+\$0.00		
62. Total	personal property. Add lines 56 through 61	\$2,075.00	Copy personal property total +	\$2,075.00
63. Total	of all property on Schedule A/B. Add line 55 + line 62		·····-	\$2,075.00

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Fill in this inf	ormation to id	dentify your	case:					
Debtor 1	Ernestine		Hart					
	First Name	Middle Name						
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name					
		the: NORTHE	RN DISTRICT OF I	LLIN	IOIS		☐ Check if this is an	
Case number (if known)							amended filing	
Official Form	106C							
Schedule C	: The Prope	rty You Cl	aim as Exemp	ot				04/16
Using the property	you listed on Schill out and attach to	edule A/B: Prop o this page as m	perty (Official Form 106	SA/B	as your source,	list the prop	sible for supplying correct erty that you claim as exe On the top of any addition	empt. If more
is to state a speci exempted up to the receive certain be exemption of 100° property is determ	fic dollar amount ne amount of any enefits, and tax-ex % of fair market we nined to exceed to	as exempt. Al applicable stat xempt retireme value under a la that amount, yo	Iternatively, you may tutory limit. Some ex nt fundsmay be unl	claii emp imite mpti	m the full fair ma tionssuch as tl ed in dollar amou on to a particula	rket value nose for he int. Howev r dollar am	ver, if you claim an ount and the value of the	
		·	-					
	exemptions are	-	Check one only,		,	filing with y	ou.	
سخا	-		ukruptcy exemptions. U.S.C. § 522(b)(2)	11 U	.S.C. § 522(b)(3)			
2. For any prop	erty you list on S	Schedule A/B th	nat you claim as exen	npt, i	fill in the informa	tion below	·.	
Brief description Schedule A/B that			Current value of the portion you own		ount of the mption you clair	-	ecific laws that allow exe	emption
			Copy the value from Schedule A/B		eck only one box h exemption	for		
Brief description:			\$1,275.00		\$1,275.00	735	5 ILCS 5/12-1001(c)	
2003 Kia Sedon 2003 Kia Sedon Line from <i>Schedule</i>	a (approx. 140,	•			100% of fair ma value, up to any applicable statu limit	rket	(,	
Brief description:			\$400.00		\$400.00	735	iLCS 5/12-1001(b)	
5 rooms of furni Line from Schedule		ages			100% of fair ma value, up to any applicable statu limit	,		
(Subject to ac	ljustment on 4/01/	19 and every 3 y	more than \$160,375? years after that for cas d by the exemption with	es fi		•	,	

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Debtor 1 Ernestine Hart	Case number (if known)				
Part 2: Additional Page					
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption			
Brief description: 3 Tv's, Cell phone and other assorted items of electronics Line from Schedule A/B:	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		
Brief description: Necessary wearing apparel Line from Schedule A/B:11	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)		
Brief description: Cash Line from Schedule A/B:16	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)		

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F	ill in this info	ormation to ide	entify your case:				
Б	ebtor 1	Ernestine		Hart			
		First Name	Middle Name	Last Name			
D	ebtor 2						
(5	Spouse, if filing)	First Name	Middle Name	Last Name			
υ	nited States Bar	nkruptcy Court for th	ne: NORTHERN D I	STRICT OF ILLING	ois		
c	ase number					☐ Check if this i	o on
(it	f known)					amended filin	
\Box	ficial Form	106D					
_			/ho Have Clai	ms Secured I	y Property		12/15
_							
cor	rect information	n. If more space i	s needed, copy the		it out, number the en	ally responsible for sup tries, and attach it to th	
1.	Do any credit	ors have claims se	ecured by your prop	erty?			
		ck this box and sub in all of the informa		ourt with your other so	hedules. You have no	othing else to report on th	nis form.
P	art 1: List	t All Secured C	laims				
_	12-4-11		Programme di				
2.			ditor has more than o for each claim. If mo		Column A	Column B	Column C
	creditor has a	particular claim, list	the other creditors in	n Part 2. As	Amount of claim	Value of collateral	Unsecured
	much as possi creditor's name	•	in alphabetical order	according to the	Do not deduct the	that supports this	portion
	CICUITOI S HAITI	ᠸ.			value of collateral	claim	If any

\$0.00

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Fill in this info	ormation to id	lentify your c	ase:			
Debtor 1	Ernestine	APTH AT	Hart	-		
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	-		
(Opodoc, ii iiiiig)	T not Hamo	Middle Hame	Lactivamo			
United States Bar	nkruptcy Court for	the: NORTHER	RN DISTRICT OF ILLINOIS			
Case number (if known)					Check if this is a amended filing	an
Official Form	106E/F					
Schedule E/	F: Creditors	s Who Have	e Unsecured Claims			12/15
If more space is not to this page. On the	eeded, copy the line top of any add	Part you need, fi litional pages, w	I claims that are listed in Schedulill it out, number the entries in the rite your name and case number secured Claims	e boxes on the left. A		, , ,
1. Do any credit	ors have priority	unsecured clair	ns against you?			
claim. For eac	ı r priority unsec u ch claim listed, ide	entify what type o	creditor has more than one priority f claim it is. If a claim has both prio	ority and nonpriority am	ounts, list that clai	m here and
more space is	•	y unsecured clair	nuch as possible, list the claims in a ms, fill out the Continuation Page of	•	-	
(For an explar	nation of each type	e of claim, see the	e instructions for this form in the ins	struction booklet.		
				Total claim	Priority amount	Nonpriority amount
2.1				\$2,950.00	\$2,950.00	\$0.00
Robert J. Adams	s & Associates		Loot 4 digito of account number			•
Priority Creditor's Name 901 W. Jackson,			Last 4 digits of account numberWhen was the debt incurred?			
Number Street	,		when was the debt incurred?	12/31/2014	_	
			As of the date you file, the clain	n is: Check all that app	oly.	
Ob.:			Contingent Unliquidated			
Chicago City		60607 ZIP Code	Disputed			
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated						
☐ Check if this collist the claim subject ☐ No ☐ Yes	laim is for a com	munity debt	Other. Specify Attorney fees for this case	se		

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Part 2:	Debtor 1	Ernestine Hart	Case number (if known)	
No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes Yes	Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. AT&T	3. Do an	y creditors have nonpriority unsecured	I claims against you?	
If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim its. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2. Total claim	ш.		. Submit this form to the court with your other schedules.	
AT&T Last 4 digits of account number PO Box 8100 Number Street Contingent Uniquidated Disputed Check if this claim is for a community debt is the claim subject to offset? State ZiP Code Who incurred the debt? Check one. Contingent Uniquidated Check one. Contingent Uniquidated Check one. Contingent Contingent Check one. Contingent Check one. Contingent Check one. Contingent Check one. Contingent Check one. Contingent Check one Check one Check if this claim is for a community debt is the claim subject to offset? Check one Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Check if this claim is for a community debt is the claim subject to offset? Credit Card	If a cre type o	editor has more than one nonpriority unse f claim it is. Do not list claims already inc	cured claim, list the creditor separately for each claim. For each claim listed, identify w luded in Part 1. If more than one creditor holds a particular claim, list the other creditor	
AT8.T Nospriority Creditor's Name PO Box 8100 Number Street Aurora IL 60507 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Aleast one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Aurora Street Aurora IL 60507 City State ZiP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Aleast one of the debtor state of the debtor 2 only Aleast one of the debtor state of the debtor 2 only Aleast one of the debtor 3 only Aleast one of the debtor 4 only Aleast one of the debtor 4 only Aleast one of the debtor 5 only Aleast one of the debtor 4 only Aleast one of the debtor 5 only Baltimore MD 21297 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Aleast one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Disputed Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured c			Total o	laim
Nonportry Creditor's Name PO Box 810 Street Street Street Street Street Contingent Unliquidated Disputed Dispu				103.00
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 and Debtor 2 only Obertory Creditor's Name PO Box 17633 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Utility Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: When was the debt incurred? Type of NONPRIORITY unsecured claim: Type of NoNPR		reditor's Name		
Aurora IL 60507 City State ZIP Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only State St			When was the debt incurred?	
Aurora L 60507 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Utility Utility	Number	Street	As of the date you file, the claim is: Check all that apply.	
Aurora L 60507 City State ZIP Code Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 call and betor 3 call and betor 4 call and betor 4 call and betor 5 call and betor 6 call and				
Aurora IL 60507 Check one. State ZIP Code Check one. Debtor 1 only Debtor 2 only Debtor 2 only This claim is for a community debt Debtor 1 and Debtor 2 only This claim is for a community debt Debtor 1 only This claim is for a community debt Debtor 1 only This claim is for a community debt Debtor 1 only This claim is for a community debt Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only This claim is for a community debt Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Debtor to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and othe			— — '	
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Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Ves Street Contingent Continge	,		Type of NONPRIORITY unsecured claim:	
Debtor 2 only			☐ Student loans	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? Who Yes Last 4 digits of account number Nonpriority Creditor's Name PO Box 17633 Number Street Baltimore City Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts \$200.00	ш	•		
At least one of the debtors and another Check if this claim is for a community debt		•		
Check if this claim is for a community debt Is the claim subject to offset? No	At leas	t one of the debtors and another		
Is the claim subject to offset? No	Check	if this claim is for a community debt		
No Yes \$200.00	Is the clain	n subject to offset?	· · · · · · · ·	
\$200.00 Carson Pirie Scott Nonpriority Creditor's Name PO Box 17633 Number Street MD 21297 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card		•		
Carson Pirie Scott Nonpriority Creditor's Name PO Box 17633 Number Street Mb 21297 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card				
Nonpriority Creditor's Name PO Box 17633 Number Street Baltimore City State ZIP Code Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	4.2		\$	200.00
Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			Last 4 digits of account number	
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			When was the debt incurred?	
Baltimore MD 21297 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			As of the date you file, the claim is: Check all that apply.	
Baltimore MD 21297 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			• • • • • • • • • • • • • • • • • • • •	
Baltimore MD 21297 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No			Unliquidated	
City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Raltimore	MD 21297	Disputed	
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No			Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	Who incur	red the debt? Check one.	••	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No				
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No		•		
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ № ☑ № ☐ No				
Is the claim subject to offset? ☑ No	ш			
<u>☑</u> No			Credit Card	
		n subject to offset?		
	≌ ∵			

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Debtor 1	Ernestine Hart	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing	g any entries on this page, number the age.	m sequentially from the	Total claim
4.3			\$100.00
	BURBANK	Last 4 digits of account number	
Nonpriority C	reditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ ☐ Disputed	
Burbank	IL 60459		
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
□ Debtor		Student loans	
Debtor	2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
ш	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	Other. Specify	
_	if this claim is for a community debt	Tickets	
No Yes	n subject to offset?		
4.4			\$2,322.12
City of Ch	icago	Last 4 digits of account number	· · · · · · · · · · · · · · · · · · ·
Nonpriority C Dept. Of F	reditor's Name	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
Aminstrat	ive Hearings Collections	_ Contingent	
121 N. La	salle	☐ Unliquidated ☐ ☐ Disputed	
Chicago	IL 60602		
City Who incur	State ZIP Code red the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor		Student loans Obligations arising out of a congration agreement or diverse	
Debtor	2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
ш	t one of the debtors and another	Other. Specify	
_	if this claim is for a community debt	parking tickets-non dischargeable	
Is the clain No	n subject to offset?		
Yes			
V612794			
A838620			
122K819			

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Debtor 1 Ernestine Hart	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.5		\$1,112.00
Crandon Emergency Physicians	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 42911 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Philadelphia PA 19101	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
No No		
Yes		
4.6		\$0.00
Debt Recovery Solutions	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 9001 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
	Disputed	
Westbury NY 11590 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Other. Specify	
☐ Check if this claim is for a community debt	Collecting for -US Cellular	
Is the claim subject to offset?		
☑ No		
Yes		
4.7		\$500.00
Fashion Bug	Last 4 digits of account number	Ψοσο.σο
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 84073		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Columbus GA 31908-4073		
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	oreun Garu	
No		
Yes		

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Debtor 1 Ernestine Hart	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.8		\$1,000.00
Fingerhut	Last 4 digits of account number	
Nonpriority Creditor's Name 400 N, Rogers Rd.	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Olathe KS 66063-3330 City State ZIP Code	_	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Orean Oara	
☑ No		
Yes		
4.9		\$5,981.00
GM Financial Nonpriority Creditor's Name	Last 4 digits of account number	
PO Box 181145	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
Arlington TX 76096	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Reposession	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.10		\$2,000.00
Jc Penny	Last 4 digits of account number	
Nonpriority Creditor's Name P.O.Box 96001	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
	— ☐ Disputed	
Orlando FL 32896 City State ZIP Code	Time of MONDBIODITY american deleting	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
✓ No		
T Yes		

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Last 4 digits of account number S2,000.00	Debtor 1 Ernestine Hart	Case number (if known)	
Last 4 digits of account number S2,000.00	Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
Last 4 digits of account number When was the debt incurred?	After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
Last 4 digits of account number Singer Sin	4.11		\$2,000.00
San Antonio TX 78365 Type of NONPRIORITY unsecured claim: Student loans Student lo	Lane Bryant	Last 4 digits of account number	
San Antonio TX 78265 Contingent Uniquidated Disputed		When was the debt incurred?	
San Antonio TX 78265 City State ZiP Code Who incurred the debt? Check one. Student leans Student leans Doleptor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor		As of the date you file, the claim is: Check all that apply.	
Debtor 1 and Debtor 2 only Debtor 3 and Debtor 3 only Debtor 4 and Debtor 3 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debto			
San Antonio			
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 1 only Debtor 2 only At least one of the debtors and another Debtor 2 only At least one of the debtors and another Debtor 2 only At least one of the debtors and another Debtor 2 only State Zip Code Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Debtor 2 only State Zip Code Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 o			
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 and Debtor 4 and Debtor 3 and Debtor 4 and Debtor 4 and Debtor 5 and Debtor 4 and Debtor 5 and Debtor 5 and Debtor 4 and Debtor 5 and Deb	,	•••	
Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Steel Card	Debtor 1 only		
A least one of the debtors and another Check off. it his claim is for a community debt is the claim subject to offset? Other. Specify Credit Card			
Check if this claim is for a community debt is the claim subject to offset? No	- 보고 :		
Is the claim subject to offset? Yes Yes 4.12			
State ZiP Code	Is the claim subject to offset?	Grown Gara	
Mike Haggerty VW Nonpriority Creditor's Name 8920 S Cicero Ave Number Street Oaklawn IL 60453 City State ZiP Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only State Last 4 digits of account number As of the date you file, the claim is: Check all that apply. Type of NONPRIORITY unsecured claim: Who incurred the debt? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obelogations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Reposession \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$3,1125.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Other. Specify Reposession \$2,000.00			
Nonpriority Creditor's Name Sago2 S Cicero Ave Number Street Stre			\$7,125.00
Sazo S Cicero Ave Number Street Street Street Street Street Street Contingent Unliquidated Disputed	Mike Haggerty VW Nonpriority Creditor's Name		
Oaklawn IL 60453 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ No	8920 S Cicero Ave		
Oaklawn L 60453 Disputed	Number Street	<u> </u>	
Disputed		= n :	
Type of NONPRIORITY unsecured claim: Who incurred the debt?	Oaklawn II 60453		
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.13 Sears Credit Cards Nonpriority Creditor's Name PO Box 183082 Number Street PO Box Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? □ Debtor 1 and Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 and pebtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 sind Debtor 2 only □ Check if this claim is for a community debt Is the claim subject to offset?		Type of NONPRIORITY unsecured claim:	
Debtor 2 only		•••	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ No □ Yes □ 4.13 □ \$2,000.00 Sears Credit Cards □ When was the debt incurred? □ Columbus □ Street □ OBOX □ State □ ZIP Code Who incurred the debt? □ Check or 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt is the claim subject to offset? □ Check if this claim is for a community debt is the claim subject to offset? □ Credit Card □ Debtor 1 only □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Credit Card □ Debtor 1 only □ Debtor 2 only □ Check if this claim is for a community debt is the claim subject to offset? □ Credit Card	□ B. b. b. a.		
At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? At last digits of account number Sears Credit Cards			
State Zip Code Check if this claim subject to offset?	At least one of the debtors and another		
\$2,000.00 Sears Credit Cards Nonpriority Creditor's Name PO Box 183082 Number Street PO Box Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 \$2,000.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card		Reposession	
\$2,000.00 Sears Credit Cards Nonpriority Creditor's Name PO Box 183082 Name PO Box Columbus City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Vother. Specify Credit Card	— N.		
\$2,000.00 Sears Credit Cards Nonpriority Creditor's Name PO Box 183082 Number Street PO Box Columbus OH 43218-3082 City Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? \$2,000.00 \$2,000.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card	—		
Sears Credit Cards Nonpriority Creditor's Name PO Box 183082 Number Street PO Box Street PO Box State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card			
When was the debt incurred? Number Street Street Street Street Columbus OH 43218-3082 OH State ZIP Code Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obetor 1 and Debtor 2 only Oheck if this claim is for a community debt Is the claim subject to offset? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Coek if this claim is for a community debt Other. Specify Credit Card Contingent Unliquidated Disputed Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Other. Specify Other. Specify Other. Specify Other Card	4.13		\$2,000.00
PO Box 183082 Number Street PO Box Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		Last 4 digits of account number	
Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	PO Box 183082	When was the debt incurred?	
Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		<u> </u>	
Columbus OH 43218-3082 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	1 O Box	—	
City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card	Columbus OII 42240 2002		
Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? Student loans ○ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ○ Other. Specify Credit Card		Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card	Who incurred the debt? Check one.	<u></u>	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify Credit Card	—		
☐ Check if this claim is for a community debt			
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?		
☑ No □ Yes			

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Debtor 1 Ernestine Hart	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.14		\$962.00
Sprint	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 600760 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Jacksonville FL 32260-0670		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Utility	
Is the claim subject to offset?	Othicy	
✓ No Yes		
4.15		£4.4C.00
Swiss Colony Montgomer	Last 4 digits of account number	\$146.00
Nonpriority Creditor's Name	When was the debt incurred?	
1112 7th Ave Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
Monroe WI 53566	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Credit Card	
No		
Yes		
4.16		\$60.00
TCF Bank	Last 4 digits of account number	-
Nonpriority Creditor's Name 800 Burr Ridge Parkway	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Burr Ridge IL 60521 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Other	
Is the claim subject to offset?	Canol	
✓ No		
☐ Yes		

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Debtor 1 Ernestine Hart	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.17		\$274.00
US Cellular	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 0203 Number Street	As of the date you file, the claim is: Check all that apply.	
- Circle	_ ☐ Contingent	
	Unliquidated	
Palatine IL 60055	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
	Cell phone	
Is the claim subject to offset? No		
Yes		
4.18		\$146.21
VELDOS	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 2824 Number Street	As of the date you file, the claim is: Check all that apply.	
Transcri Circor	_ ☐ Contingent	
	Unliquidated	
Woodstock CA 30188-1386	Disputed	
Woodstock CA 30188-1386 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
□	Other. Specify	
Check if this claim is for a community debt	Collecting for -Montgomery wards	
Is the claim subject to offset?		
☑ No □ Yes		
4.19		\$800.00
WOW! Internet and Cable	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 5715		
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	☐ Unliquidated	
0 10	Disputed	
Carol Stream IL 60197 City State ZIP Code	Turns of NONDRIGHTY unconsumed alaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
☐ Check if this claim is for a community debt	Other	
Is the claim subject to offset?		
No No		
Yes		

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Debtor 1	Ernestine F	lart			Case number (if known)
Part 3:	List Othe	rs to B	e Notified Abou	it a Debt That You Already	y Listed
For exam creditor i debts tha	nple, if a col in Parts 1 or at you listed	lection ag 2, then l in Parts	gency is trying to o	collect from you for a debt you o gency here. Similarly, if you ha itional creditors here. If you do	r a debt that you already listed in Parts 1 or 2. owe to someone else, list the original ave more than one creditor for any of the o not have additional parties to be notified for
Commonwe	alth Financ	cial		On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name 245 Main St				Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	reet			Collecting for -Crandon Emergency	Part 2: Creditors with Nonpriority Unsecured Claims
Dielesen Cite		DA	40504	 Last 4 digits of account num 	nber
Dickson City City	y	PA State	18504 ZIP Code	_	
ENHANCED	RECOVER	RY COM	PANY	On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name P.O.Box 575	547			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Str	eet			Collecting for -AT&T	Part 2: Creditors with Nonpriority Unsecured Claims
la alsa anvilla		FL	32241	Last 4 digits of account num	nber
Jacksonville City	<u> </u>	State	ZIP Code	_	
Enhanced R	ecovery C	ompany	LLC	On which entry in Part 1 or P	Part 2 did you list the original creditor?
Name 8014 Bayber	rry Rd.			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Str	eet			Collecting for - Sprint	Part 2: Creditors with Nonpriority Unsecured Claims
			22250 7440	 Last 4 digits of account num 	nber
Jacksonville City	2	FL State	32256-7412 ZIP Code	_	
John H Stro	ger Cook (County F	lospital	On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name PO Box 7012	21			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
	eet				Part 2: Creditors with Nonpriority Unsecured Claims
				 Last 4 digits of account num 	nber
Chicago City		IL State	60673 ZIP Code	_	

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Debtor 1	Ernestine Hart	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	· · · · · · · · · · · · · · · · · · ·

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
nom Fait i	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	^{6d.} -	\$2,950.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$2,950.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} -	\$26,831.33
	6j.	Total. Add lines 6f through 6i.	6j.	\$26,831.33

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Fill in this inf	ormation to id				
Debtor 1	Ernestine		Hart		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number					Check if this is an
(if known)				_	amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fi	II in this info	ormation to ide	entify your case:			
De	ebtor 1	Ernestine		Hart		
		First Name	Middle Name	Last Name		
	ebtor 2					
(S	pouse, if filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court for t	he: NORTHERN DI	STRICT OF ILLINOIS		
	ase number				Check if this is an	
(It	known)				amended filing	
					_	
Of	ficial Form	106H				
			-1		4	0/45
<u> </u>	neaule H:	Your Codel	otors		1	2/15
	e. On the top	•	Pages, write your na		the left. Attach the Additional Page to this wn). Answer every question. se as a codebtor.)	
2.		a, California, Idaho		• • • •	y? (Community property states and territories xas, Washington, and Wisconsin.)	
	ــنا		er spouse, or legal eq	uivalent live with you at the ti	ne?	
3.	person shows creditor on S	n in line 2 again a <i>chedule D</i> (Officia	s a codebtor only if t	hat person is a guarantor of dule E/F (Official Form 106E	tor if your spouse is filing with you. List the cosigner. Make sure you have listed the (F), or Schedule G (Official Form 106G). Use	
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the de	ebt

Check all schedules that apply:

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Fill in this inform	nation to identif	v vour case:					
Debtor 1	Ernestine		Hart				
Debtor	First Name	Middle Name	Last Name			— Che	eck if this is:
Debtor 2						_ _	An amended filing
(Spouse, if filing)	First Name	Middle Name	Last Name				A supplement showing postpetition
United States Bank	ruptcy Court for the:	NORTHERN	DISTRICT OF IL	LINO	IS	- 🗖	chapter 13 income as of the following date:
(if known)				_			MM / DD / YYYY
Official Form 10	<u>061</u>						
Schedule I: Yo	our Income						12/15
responsible for supp include information a about your spouse. I your name and case	lying correct inform bout your spouse. If more space is nee	ation. If you are If you are separ ded, attach a se Answer every c	e married and not rated and your spo eparate sheet to th	filing j ouse is	jointly, a s not filir	nd your : ng with y	I Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
Fill in your emplinformation.	oyment		Debtor 1				Debtor 2 or non-filing spouse
If you have more job, attach a sepa		yment status	☐ Employed				☐ Employed
with information a additional employ			✓ Not employed	ed			☐ Not employed
additional employ	Occup	ation	Unemployed				_
Include part-time, or self-employed		yer's name					
Occupation may i student or homen applies.	p.,	oyer's address	Number Street				Number Street
			City		State Z	p Code	City State Zip Code
	How I	ong employed ti	here?				
		. ,					
Part 2: Give I	Details About M	onthly Incom	е				
Estimate monthly inconon-filing spouse unless			 If you have noth 	ing to	report fo	r any line	, write \$0 in the space. Include your
If you or your non-filing you need more space,	•		er, combine the info	ormatio	on for all	employe	rs for that person on the lines below. If
					For Deb	tor 1	For Debtor 2 or non-filing spouse
	ess wages, salary, a s). If not paid month			2.		\$0.00	
3. Estimate and list	t monthly overtime	oay.		3. +	•	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.		\$0.00	

Official Form 106l Schedule I: Your Income page 1

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Debti	Ernestine Hart		Case nu	mber (if knowr	۱)		
			For Debtor 1	For Debtor			
	Copy line 4 here	4.	\$0.00				
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00				
	5b. Mandatory contributions for retirement plans	5b.	\$0.00				
	5c. Voluntary contributions for retirement plans	5c.	\$0.00				
	5d. Required repayments of retirement fund loans	5d.	\$0.00	-			
	5e. Insurance	5e.	\$0.00				
	5f. Domestic support obligations	5f.	\$0.00	-			
			\$0.00				
	5g. Union dues	5g.	Ψ0.00	-			
	5h. Other deductions. Specify:	5h.•	+\$0.00				
	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00				
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00				
8.	List all other income regularly received:						
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.						
	8b. Interest and dividends	8b.	\$0.00				
	8c. Family support payments that you, a non-filing spouse, or a	8c.	\$0.00				
	dependent regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.						
	8d. Unemployment compensation	8d.	\$325.00				
	Be. Social Security	8e.	\$0.00				
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	- 8f.	\$0.00				
	8g. Pension or retirement income	8g.	\$0.00				
	8h. Other monthly income.						
	Specify: Link Card	8h	+\$193.00				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$518.00				
10	Calculate monthly income. Add line 7 : line 0	10.	¢E40.00			¢E40.00	
	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	<u>\$518.00</u>	+	=	\$518.00	
	 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 						
	Do not include any amounts already included in lines 2-10 or amounts that	at are i	not available to pay	expenses liste	d in Sche	edule J.	
	Specify: Contributions from siblings				11. +	\$110.00	
	Add the amount in the last column of line 10 to the amount in line 11.				12.	\$628.00	
	income. Write that amount on the Summary of Your Assets and Liabilities if it applies.	s and	Certain Statistical In	normation,		Combined	
	Do you expect an increase or decrease within the year after you file t	his fo	orm?			monthly income	
	□ No. Debtor is actively seeking employment					1	
	Yes. Explain:						

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G	ill in this inforn	nation to identif	y your case:		٠.			
	Debtor 1	Ernestine	Hai	-1		ck if this	is: ended filing	
	Deptor 1	First Name		Name		A supp	lement showing · 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name Last	Name		followin		s or the
	United States Bank	ruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		MM / D	D / YYYY	
	Case number (if known)					IVIIVI 7 D	<i>D</i>	
C	fficial Form 10)6,J						
		our Expenses	5					12/15
nai	rrect information. I							
1.	Is this a joint cas	e?						
2.	Do you have dep Do not list Debtor Debtor 2. Do not state the dinames. Do your expense expenses of peolyourself and you	Debtor 2 live in a se s. Debtor 2 must file endents? 1 and ependents' s include ple other than	parate household? c Official Form 106J-2, Expension No Yes. Fill out this information for each dependent	Dependent's relatio	nshij		2. Dependent's age	Does dependent live with you? No No No No Yes Yes Yes Yes
			ng Monthly Expenses					
to		of a date after the	ruptcy filing date unless yo bankruptcy is filed. If this i	-			-	
			government assistance if y Schedule I: Your Income (C				Your expens	ses
4.			nses for your residence. any rent for the ground or lot.			4	4	\$0.00
	If not included in	line 4:						
	4a. Real estate to	axes				4	4a	
	4b. Property, hor	neowner's, or renter'	s insurance			4	4b	
	4c. Home mainte	enance, repair, and ι	ipkeep expenses			4	1c	
	4d. Homeowner's	s association or cond	dominium dues			2	4d.	

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Deb	otor 1 Ernestine Hart	Case number (if known)	
		Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$35.00
	6b. Water, sewer, garbage collection	6b	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7.	\$193.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$80.00
10.	Personal care products and services	10.	\$20.00
11.	Medical and dental expenses	11.	\$20.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$120.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	
14.	Charitable contributions and religious donations	14.	
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	
	15b. Health insurance	15b.	
	15c. Vehicle insurance	15c.	\$40.00
	15d. Other insurance. Specify:	15d.	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b.	
	17c. Other. Specify:	17c.	
	17d. Other. Specify:		
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you. Specify:	19.	

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Deb	tor 1	Ernestine Hart	Case number (if known)					
20.		real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.						
	20a.	Mortgages on other property	20a					
	20b.	Real estate taxes	20b.					
	20c.	Property, homeowner's, or renter's insurance	20c.					
	20d.	Maintenance, repair, and upkeep expenses	20d					
	20e.	Homeowner's association or condominium dues	20e					
21.	Other	. Specify:	^{21.} +					
22.	Calculate your monthly expenses.							
	22a.	Add lines 4 through 21.	22a	\$508.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$508.00				
23.	Calculate your monthly net income.							
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$628.00				
	23b.	Copy your monthly expenses from line 22c above.	23b. _	\$508.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$120.00				
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?							
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	□ N	No.						
	☑ \	Yes. Explain here: Expenses will change somewhat when debtor becomes employed	1					
		Expenses will change somewhat when debtor becomes employed	ı					

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F	ll in this inf	ormation to i	dentify your case	:		
De	ebtor 1	Ernestine	ACLU AL	Hart	_	
		First Name	Middle Name	Last Name		
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name	_	
	-		sthat NODTHERN F	NETRICT OF ILLINOIS		
		nkruptcy Court for	rtne: NORTHERN L	DISTRICT OF ILLINOIS	-	
	ase number known)		ck if this is an ended filing			
Of	ficial Form	106Sum				-
Su	mmary of	Your Asse	ets and Liabilit	ties and Certain Sta	atistical Information	12/1
cori sch	ect informatio	n. Fill out all of	your schedules first; nal forms, you must	then complete the informat	r, both are equally responsible for tion on this form. If you are filing check the box at the top of this p	g amended
						Your assets Value of what you own
1.	Schedule A/B	•				
	1a. Copy line	\$0.00				
	1b. Copy line	\$2,075.00				
	1c. Copy line	e 63, Total of all p	roperty on Schedule A	VB		\$2,075.00
P	art 2: Su	mmarize You	r Liabilities			
						Your liabilities Amount you owe
2.				Property (Official Form 106D f claim, at the bottom of the la	0) ast page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F. 3a. Copy the	\$2,950.00				
	3b. Copy the	total claims from	Part 2 (nonpriority un	secured claims) from line 6j o	f Schedule E/F	\$26,831.33
					Your total liabilities	\$29,781.33
P	art 3: Su	mmarize You	r Income and Exp	penses		
			•			

Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....

\$508.00

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Deb	otor 1	Ernestine Hart Case nu	mbe	er (if known)	
P	art 4:	Answer These Questions for Administrative and Statistical Rec	orc	ds	
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?			
	_	lo. You have nothing to report on this part of the form. Check this box and submit this es	forn	m to the court with yo	ur other schedules.
7.	What I	kind of debt do you have?			
	Ľ	Your debts are primarily consumer debts. Consumer debts are those "incurred by a amily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purp			a personal,
		Your debts are not primarily consumer debts. You have nothing to report on this pair form to the court with your other schedules.	rt of	the form. Check this	box and submit
8.		the Statement of Your Current Monthly Income: Copy your total current monthly income: All Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come	e from	\$292.33
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedule E/F:			
				Total claim	
	From	Part 4 on Schedule E/F, copy the following:			
	9a. D	Comestic support obligations. (Copy line 6a.)		\$0.0	0
	9b. T	axes and certain other debts you owe the government. (Copy line 6b.)		\$0.0	<u>0</u>
	9c. C	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)		\$0.0	<u>0</u>
	9d. S	Student loans. (Copy line 6f.)		\$0.0	0
		Obligations arising out of a separation agreement or divorce that you did not report as riority claims. (Copy line 6g.)		\$0.0	0
	9f. D	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+	\$0.0	<u>0</u>

9g. Total. Add lines 9a through 9f.

\$0.00

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Fill in this inf				
	ormation to i	dentify your case	:	
Debtor 1	Ernestine First Name	Middle Name	Hart Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		r the: NORTHERN D	DISTRICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an I	ndividual Debt	tor's Schedules	12/1
Sic	Dalaw			
315	n Below			
		someone who is NOT	an attorney to help you fill o	ut bankruptcy forms?
		someone who is NOT	an attorney to help you fill o	ut bankruptcy forms?
Did you pay o		someone who is NOT	an attorney to help you fill o	ut bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Did you pay o	or agree to pay s ame of person			Attach Bankruptcy Petition Preparer's Notice,

Date <u>04/28/2017</u>

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	Ernestine First Name	Middle Name		Hart Last Name			
Debtor 2							
Spouse, if filin	g) First Name	Middle Name		Last Name			
Jnited States E	Sankruptcy Court for	the: NORTHE	RN DIS	TRICT OF ILL	INOIS		
Case number if known)					_	_	ck if this is an ended filing
fficial For	n 107						
tatement	of Financial	Affairs for	Indiv	iduals Fili	ing for Bank	ruptcv	04/16
Part 1: G	ive Details Abo	ut Your Mari			ere You Lived E	Before	
What is you Married Not man	ive Details Abo	ut Your Mari	tal Sta	atus and Wh		Before	
What is you ☐ Married ☐ Not man During the ☐ No	ive Details Abo	ut Your Mari	tal Sta	atus and Who	you live now?		
What is you ☐ Married ☐ Not man During the ☐ No	ive Details About reurrent marital stried last 3 years, have yet all of the places y	ut Your Mari	ere oth	er than where the control of the con	you live now?		Dates Debtor 2 lived there
What is you Married Not man During the No Yes. Li	ive Details About reurrent marital stried last 3 years, have yet all of the places y	ut Your Mari	ere oth	er than where the control of the con	you live now? ade where you live n	ow.	
What is you Married Not man During the No Yes. Li Debtor 1	ive Details About reurrent marital stried last 3 years, have yet all of the places y	ut Your Mari	ere oth st 3 yea Dates	er than where the control of the con	you live now? Ide where you live n	ow.	lived there
What is you Married Not man During the No Yes. Li Debtor 1	ive Details About recurrent marital stried last 3 years, have yet all of the places yet:	ut Your Mari	ere oth st 3 yea Dates lived	er than where years. Do not incluse Debtor 1 there	you live now? Ide where you live n	ow.	lived there Same as Debtor
What is you Married Not man During the No Yes. Li Debtor 1	ive Details About reurrent marital stried last 3 years, have yest all of the places yes: King Drive Street	ut Your Mari	ere oth st 3 yea Dates lived	er than where yours. Do not incluse Debtor 1 there	you live now? Ide where you live n Debtor 2: Same as Deb	ow.	lived there Same as Debtor From

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Part 2:		Ernestine Hart	Case nur	Case number (if known)		
		Explain the Sources of Your Income				
4.	Fill in th	I have any income from employne total amount of income you receive filing a joint case and you have it. Fill in the details.	ived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$0.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		calendar year: December 31, 2016) YYYY	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$10,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		ndar year before that: December 31, 2015)	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$10,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
5.	5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.					vsuits; royalties;
	List eac	h source and the gross income fro	m each source separately. [Oo not include income	that you listed in line 4.	
	✓ No ☐ Yes	. Fill in the details.				

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Del	otor 1	Ernestin	e Hart	Case number (if known)
Р	art 3:	List Ce	ertain Payments You Made Before You Filed	for Bankruptcy
6.	Are eith	er Debtor	1's or Debtor 2's debts primarily consumer debts?	
	□ No.		Debtor 1 nor Debtor 2 has primarily consumer debts. d by an individual primarily for a personal, family, or hous	g ()
		During t	the 90 days before you filed for bankruptcy, did you pay a	ny creditor a total of \$6,425* or more?
		□ No.	Go to line 7.	
		Yes	List below each creditor to whom you paid a total of \$6,4 total amount you paid that creditor. Do not include payn child support and alimony. Also, do not include paymen	nents for domestic support obligations, such as
		* Subje	ct to adjustment on 4/01/19 and every 3 years after that fo	r cases filed on or after the date of adjustment.
	√ Yes	Debtor	1 or Debtor 2 or both have primarily consumer debts.	
		During t	the 90 days before you filed for bankruptcy, did you pay at	ny creditor a total of \$600 or more?
		☑ No.	Go to line 7.	
		☐ Yes.	List below each creditor to whom you paid a total of \$60 creditor. Do not include payments for domestic support Also, do not include payments to an attorney for this bar	obligations, such as child support and alimony.
7.	Insiders corporat agent, in	include you ions of wh ncluding or	ich you are an officer, director, person in control, or owner	on a debt you owed anyone who was an insider? I partners; partnerships of which you are a general partner; of 20% or more of their voting securities; and any managing .C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes	. List all p	ayments to an insider.	
8.		year befo	ore you filed for bankruptcy, did you make any paymen ler?	nts or transfer any property on account of a debt that
	Include	payments	on debts guaranteed or cosigned by an insider.	
	✓ No ☐ Yes	. List all p	ayments that benefited an insider.	

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Deb	tor 1	Ernestine Hart	Case number (if known)
P	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es
) .	List all s	year before you filed for bankruptcy, were you a party in any lawsui uch matters, including personal injury cases, small claims actions, divorce tions, and contract disputes.	
	✓ No ☐ Yes	. Fill in the details.	
10.	seized,	year before you filed for bankruptcy, was any of your property reposor levied? Il that apply and fill in the details below.	ssessed, foreclosed, garnished, attached,
		Go to line 11. Fill in the information below.	
11.		0 days before you filed for bankruptcy, did any creditor, including a l s from your accounts or refuse to make a payment because you owe	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
12.		year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	e possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within 2	years before you filed for bankruptcy, did you give any gifts with a t	otal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within 2 to any c	t years before you filed for bankruptcy, did you give any gifts or cont harity?	ibutions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
Pa	art 6:	List Certain Losses	
15.		year before you filed for bankruptcy or since you filed for bankruptc saster, or gambling?	y, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	

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Debtor 1	Ernestine	Hart		Case	number (if known)	
Part 7:	List Cer	tain P	ayments or	r Transfers		
anyon Include ☐ No	ne you consul e any attorney	ted abo	out seeking ba	uptcy, did you or anyone else acting on your ankruptcy or preparing a bankruptcy petition preparers, or credit counseling agencies for ser	?	
001 Debto Person Who				Description and value of any property tran Credit Counseling	nsferred Date paymer or transfer w made	
Number S	Street			_	04/28/20	<u>\$10.00</u>
City		State	ZIP Code	_		
Email or webs	site address			_		
Person Who Made the Payment, if Not You Robert J. Adams & Associates Person Who Was Paid				Description and value of any property tran Down payment for Chapter 13	nsferred Date paymer or transfer w made	
901 W. Ja				_	04/28/20	17 \$50.00
Ste. 202				_		
Chicago City		IL State	60607 ZIP Code	_		
Email or webs	site address			_		
Person Who	Made the Payme	ent, if Not	You	_		
	-	-		uptcy, did you or anyone else acting on your with your creditors or to make payments to y		r property to
Do not	t include any p	ayment	or transfer tha	at you listed on line 16.		
✓ No	o es. Fill in the o	details.				

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Deb	tor 1	Ernestine Hart	Case number (if known)
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affair	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No	s. Fill in the details.	
19.	you are	10 years before you filed for bankruptcy, did you transfer any property e a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i , closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	•	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	•	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
	✓ No	s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	•	hold or control any property that someone else owns? Include any pr in trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

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Del	otor 1	Ernestine Hart		Case number (if known)			
Р	art 10	Give Details About Environ	mental Information				
For	the pu	pose of Part 10, the following definit	ions apply:				
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
		ous material means anything an envi nce, hazardous material, pollutant, co		us waste, hazardous substance, toxic			
Rep	port all	notices, releases, and proceedings tl	nat you know about, regardless of w	hen they occurred.			
24.	Has a law?	ny governmental unit notified you tha	nt you may be liable or potentially lia	able under or in violation of an environmental			
	☑ N	os. Fill in the details.					
25.		ou notified any governmental unit o	any release of hazardous material?	,			
		es. Fill in the details.					
26.	Have order		ministrative proceeding under any e	environmental law? Include settlements and			
	☑ N	os. Fill in the details.					
Р	art 11	Give Details About Your Bu	siness or Connections to An	y Business			
27.	Within busin		tcy, did you own a business or have	e any of the following connections to any			
	 			•			
	-	o. None of the above applies. Go to Pa					
	_	es. Check all that apply above and fill i					
28.		 2 years before you filed for bankrup ancial institutions, creditors, or other 		ent to anyone about your business? Include			
	□ N	os. Fill in the details below.					

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Debtor 1	Ernestine Hart		Case number (if known)
Part 12	Sign Below		
that answ property b	ers are true and correct. I unde	erstand that making a false statemer ankruptcy case can result in fines up	ments, and I declare under penalty of perjury nt, concealing property, or obtaining money or o to \$250,000, or imprisonment for up to 20 years,
X /s/ Err	estine Hart	X	
Ernesti	ne Hart, Debtor 1	Signature of Debtor 2	
Date	04/28/2017	Date	<u> </u>
Did you at	tach additional pages to Your	Statement of Financial Affairs for Ind	lividuals Filing for Bankruptcy (Official Form 107)?
☑ No			
Yes			
Did you pa	ay or agree to pay someone wh	no is not an attorney to help you fill o	out bankruptcy forms?
√ No			
	Name of person		Attach the Bankruptcy Petition Preparer's Notice,
	·	·	Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

ın	in re Ernestine Hart	Case No.
		Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION OF	ATTORNEY FOR DEBTOR
1.	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the pservices rendered or to be rendered on behalf of the debtor(s) in cont is as follows: 	etition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$3,000.00
	Prior to the filing of this statement I have received	\$50.00
	Balance Due	\$2,950.00
2.	2. The source of the compensation paid to me was:✓ Debtor	
3.	3. The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	4. I have not agreed to share the above-disclosed compensation wi associates of my law firm.	th any other person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with a associates of my law firm. A copy of the agreement, together with compensation, is attached.	
5.	5. In return for the above-disclosed fee, I have agreed to render legal se	rvice for all aspects of the bankruptcy case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to bankruptcy; 	the debtor in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affa	airs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and confirm	mation hearing, and any adjourned hearings thereof;

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B2030 (Form	2030)	(12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/28/2017 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J Adams & Associates
901 W Jackson Suite 202

Chicago, IL 60607 Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Ernestine Hart

Ernestine Hart

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Ernestine Hart CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

know	The above named Debtor hereby verifies that the edge.	e attached l	ist of creditors is true an	nd correct to the best of his/her	
Date	4/28/2017	Signature	/s/ Ernestine Hart		
Date			Ernestine Hart		

AT&T PO Box 8100 Aurora, IL 60507

Carson Pirie Scott PO Box 17633 Baltimore, MD 21297

CITY OF BURBANK 5650 W 75th Place Burbank, IL 60459

City of Chicago Dept. Of Revenue Aminstrative Hearings Collections 121 N. Lasalle Chicago, IL 60602

Commonwealth Financial 245 Main St Dickson City, PA 18504

Crandon Emergency Physicians PO Box 42911 Philadelphia, PA 19101

Debt Recovery Solutions PO Box 9001 Westbury, NY 11590

ENHANCED RECOVERY COMPANY P.O.Box 57547 Jacksonville, FL 32241

Enhanced Recovery Company LLC 8014 Bayberry Rd. Jacksonville, FL 32256-7412

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Fashion Bug PO Box 84073 Columbus, GA 31908-4073

Fingerhut 400 N, Rogers Rd. Olathe, KS 66063-3330

GM Financial PO Box 181145 Arlington, TX 76096

Jc Penny P.O.Box 96001 Orlando, FL 32896

John H Stroger Cook County Hospital PO Box 70121 Chicago, IL 60673

Lane Bryant PO Box 659728 San Antonio, TX 78265

Mike Haggerty VW 8920 S Cicero Ave Oaklawn, IL 60453

Sears Credit Cards PO Box 183082 PO Box Columbus, OH 43218-3082

Sprint
P.O.Box 600760
Jacksonville, FL 32260-0670

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Swiss Colony Montgomer 1112 7th Ave Monroe, WI 53566

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

US Cellular PO Box 0203 Palatine, IL 60055

VELDOS P.O.Box 2824 Woodstock, CA 30188-1386

WOW! Internet and Cable PO Box 5715 Carol Stream, IL 60197